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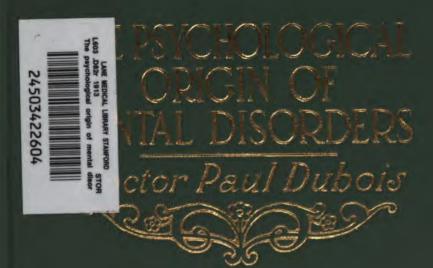
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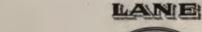
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THE PSYCHOLOGICAL ORIGIN OF MENTAL DISORDERS

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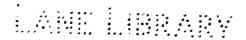
By PAUL DUBOIS, M. D.

Professor of Neuropathology in the University of Berne. Author of "The Psychic Treatment of Nervous Disorders," "The Influence of the Mind on the Body," "The Education of Self," etc.

Authorized Translation

BY

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The Psychological Origin of Mental Disorders

There are some individuals whose reason is disturbed and whose actions are guided by strange sentiments. When the mental disorder is very pronounced we confine these patients as madmen or lunatics. They are numerous, for, according to statistics, it is necessary to consign nearly ten persons out of a thousand to the asylum. In slighter degree, the disease permits of the subject living still in society, though his actions may be peculiar and often culpable; we speak then of the semi-insane or unbalanced, and endeavour to establish the degree of their responsibility. Finally, when the

mentality of the patient approaches the normal, and somatic functional symptoms seem predominant, the pathological condition is termed a *neurosis*. These "nervous" cases constitute the great bulk of the clientèle of the neurologist, while the psychoses properly so-called belong to the domain of the alienist.

There are only differences of degree between these conditions. In all of them we find abnormal states of mind. All these patients are psychopaths and it is for practical reasons alone that we set a purely conventional boundary between the psychoses and the neuroses. I have proposed the substitution of the term psychoneurosis for that of neurosis, in order to emphasize the importance of the psychic symptoms. Let

us observe that the boundary between these attenuated forms of psycopathy and the normal state is equally conventional. Griesinger says: "The question whether a man is, or is not, insane is of no significance in many cases." To indicate this absence of precise limits I have used the simile of a "degradation" in which colours gradually pass from pure white, representing ideal health, to the black of insanity.

It is to the *psychopathies* in this wide sense of the word, from the slightest neurasthenia to confirmed paranoia, that the following considerations apply.

In this subject there arises a question of capital importance, interesting in the highest degree both to medical men and to the public.

Are these psychopathies organic and due to material and primary alterations in the organ of thought, or are they psychic and induced by mental representations? One might also put the question in another form: "Is the mental trouble due to a primary cerebral lesion (cerebropathy), or is it a psychopathy in the strictest sense of the word?

The reply to this important question has varied greatly at different epochs, but it must be admitted that the *materialist*, *somatic*, or *organic* solution has dominated all the schools and still possesses the minds of modern psychiatrists and neurologists.

In ancient times, among the Hebrews and Greeks, insanity was ascribed to divine influence, to the in-

tervention of gods or demons in the lives of men. Nevertheless, we see also the development of an interesting conception which tends to be revived at the present day, namely that the psychopathies are engendered by exaggeration of the passions: anger, vengeance, amorosity, unrestrained ambition, discouragement, religious fanaticism, etc. But, with the great medical men of antiquity, we enter at once the era of materialism. Already in the Hippocratic writings there appears the view that "diseases of the mind are affections of the bodily organism." As Heinroth observes, this was the beginning of the error in which we have remained; this is what has hitherto prevented the advent of a "medicine of the mind." Already in these writings we find the term

"paranoia," and that condition is attributed to bile and to secretions vitiating the blood. The treatment advocated is also material: bleeding, emetics, purgatives, hellebore and hydro-therapeutic measures, etc. The erroneous interpretation is partly due to the fact that these writers take note, more of acute cases with fever and delirium, than of chronic insanities; and in these acute affections treatment by drugs may be usefully employed.

This physical therapy ruled in antiquity, but one often sees the idea of psychic treatment make its appearance. Already, in addition to bleeding and purgation, Celsus recommends an individual psychic treatment consisting in the encouragement of the timid and the moderating of the violent. For

riotous laughter he employs scoldings and threats; gloomy ideas are driven away by music. Punishment is used not merely to prevent wrong actions, but also to force the patient to reflect. Excepting those who were the subjects of fear, all these patients were deprived of wine.

Cœlius Aurelianus, under Trajan, indicates as psychic causes of alienation: late nights, amorous excesses, anger, grief, fear and false religiosity. Galien, on the other hand, already imbued with the anatomical spirit, pays no attention to moral influences. The compiler Aetius (A.D., 543) is frankly somatic, and attributes insanity to an inflammation of the meninges. He even essays a localization, and if the inflammation attacks the anterior lobes,

he says that there are symptoms affecting the imagination; if the middle brain is the site, then it is the intelligence that suffers, while affection of the posterior lobe deranges the mem-He indicates one or two atorv. tacks per annum as the periodicity of the insania. He describes a method of treatment which one might call psychic, employed by Philotimus, who placed a heavy hood of lead upon the head of a patient who maintained that he was headless. This is already dialectics, a manner of logic, the argument ad hominem.

Alex. de Tralles had before then employed the subterfuge, so often since used, of giving an emetic to a woman who said she had a snake in her stomach, previously placing a snake in

the basin. She was cured, he says. He also refers to the case of a woman who fell into a condition of melancholia owing to the departure of her husband, and recovered on his return.

The Jews, like the Egyptians and Persians, did not pursue this movement but retained the superstitious ideas of demonopathy. It was the day of magic, the cabala, theosophy and theurgy, errors which held sway also in the era of Roman decadence.

The same spirit of superstition reigns through all the monkish middle ages. The curative measures are prayers, the laying on of hands, exorcisms, holy water, unctions, relics and amulets—when it is not the stake.

Among the writers from the fifteenth to the eighteenth centuries we find many

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fairly good nosological descriptions, but the idea of demonopathy still rules. We find it even in Luther and Melancthon. Some authors, however, point out psychic factors, and Aggrippa de Netterheim (Cologne, 1846) already had the idea of curative action "at a distance" which was to find its complete development in the magnetism of Mesmer.

In short, from Hippocrates to Boerhaave, that is to say, down to the end of the seventeenth century, we find the theory of black bile, or various analogous somatic conceptions, reigning supreme among medical men.

The Italian, Chiarruggi (1793), like the Englishman, Cullen, advanced the view of a physical alteration of the brain, and absolutely refused the ex-

pression "diseases of the mind," for mind, he said, is immaterial and can not be diseased. Dufour, in 1786, placed the disease, not in the brain, but in the abdominal organs, anticipating by a century our moderns, imbued with the idea of intestinal autointoxication.

At last, with Pinel (1801), we enter the era of rational psychotherapy. Not only does he remove the chains from his patients at Bicêtre, but he uses his moral influence to reestablish in them, to use his exact words, "the work of logical reflection." His pupil, Esquirol, carefully studied the influence of the passions in the development of the insanities and already obtained happy results by psychotherapy. Another Frenchman, Daquin (Philosophie de la Folie, 1791), had before then written

the memorable sentence: "Greeted as paradox though it will be, I nevertheless maintain that for the cure of those who have lost their reason there is no other means than to make them—reason."

During this period, from the seventeenth to the nineteenth centuries, the English show themselves mediocre in theory, but in practise do good psychotherapy, like Pinel endeavouring to restore self-control to the patient by kindness or severity according to the case. In 1789, Harper claims that insanity is a "disease of the mind" and does not depend upon any physical disturbance, that it is the passions that lead to the want of mental balance. Therefore, as a prophylactic he advocates education directed to the lessening of the yoke of

the passions, and measures, at once, physical and moral, when the trouble is confirmed. Pargeter (1792) insists upon the influence exercised upon the patient by the look and bearing of the medical man. Haslam (1798) recognizes physical and moral factors as causes of insanity, and, in regard to the latter wrote: "The majority of the moral causes may perhaps be ascribed to faults of education which have sown the seeds of insanity in the young mind, so that slight causes suffice to produce the loss of the reason. Educators should concern themselves more with the formation of character, by lessening the yoke of the passions, than with the cultivation of knowledge."

A. Marshall, in 1815, indicated as the cause, lesions of the vessels of the

brain and heart, as our moderns point to arteriosclerosis. B. Fawcett (1780) devotes a monograph to religious melancholia and assigns as the cause: exaggeration of ideas and emotions, impressionability in face of the vicissitudes of existence, disappointed ambition, worrying temperament, and tendencies to fear or to indolence.

From the Germans of that epoch we have some judicious remarks on the subject of psychic causation. For the cure of mental diseases, Langermann (1797) advises the same prescriptions, methods and devices that educators employ to form the mind of a child, namely, to develop the patient's reason and induce him to control his feelings and correct his follies.

Reil of Halle (1803) recognizes the

value of psychic treatment, which he considers capable of improving the symptoms even in incurable cases. makes use of psychic stimulants producing pleasure or pain as the case may be, (music and encouragement on the one hand, and on the other, reproof and threats). He insists upon the necessity for preparing the patient and rendering him accessible to advice and for awakening his understanding so that he may be induced to obey. He is the German rival of Pinel. Horn and his pupil Sandtmann accepted these ideas of Reil, that is to say, direct treatment by word of mouth, by educative influence, but they only considered it to be practicable in slight cases or in the convalescence of severe cases. In the period of the insane state they

employed an indirect method which they called revulsive or antagonistic. was a treatment by pain, sometimes negative (deprivation of food, air or light), and sometimes positive (painful stimulation): internally, emetics, purgatives and sialogogues: externally. tickling, sternutatories, flagellation with nettles, cutaneous irritants, cauterization, cold affusion, douches, immersion, baths, suspension, and circumrotation; all this with the object of reawakening the diminished or distorted activity. Heinroth, cerebral whom I borrow these details, himself obtained some good results by this too energetic psychotherapy, but he admits that there were many patients who resisted and became more and more rebellious, and he quotes the saying of

Lessing in Nathan le Sage: "Kein mensch muss müssen."

I now come to Heinroth of Leipzig who, in 1818, wrote an excellent work in two volumes: "A treatise upon the disorders of the mind and their rational treatment." He styles himself "professor of psychic medicine" and, indeed, at his time no one had clearer views upon the origin of mental diseases and upon moral treatment. How is it that he has been almost forgotten and that his name takes an undistinguished place only in the bibliography of modern works on psychiatry? The reason seems to me to be that he pushes religious spiritualism to its extreme limit and recognizes the sole cause of all the psychopathies in-sin. Such an assertion, so crudely expressed could not

but awaken the susceptibilities of the tribe of biologists, all more or less materialist. Judgment was made and the victory appeared to belong to his adversaries, the somatists, represented by Nasse and Jacobi (1830).

Being aware of his exaggerated spiritualism, I confess that I approached the study of Heinroth's work with a certain amount of distrust. But the perusal restored my sympathy and I was astonished to find in his admirably written work—at the beginning of the nineteenth century they wrote better, both in Germany and France, than today—so clear an exposition of the causes of the psychopathies and such accurate views upon the bases of a rational psychotherapy. I shall endeavour in a few words to sum up his

teaching. Professing analogous ideas, I owe him a slight rehabilitation for having so long neglected the study of his works. On the other hand, I am glad to have arrived independently at a conception very similar to his, though it is reached from quite different hypotheses.

While deeply religious, Heinroth is yet a monist. He vigorously opposes any separation between body and mind. But he is a spiritualistic monist. The body is, to him, merely the instrument of the mind; it has no potency but what comes from the mind, through the power given to man by the Creator. This soul he regards as having but one primitive tendency, namely an impulse to perpetual development toward the divine being from whom it eman-

ated and to whom it aspires. Bodily disease itself, only appears real to him in so far as it is perceived by the mind; only existing, so to speak, in relation with the mind: for he well realizes what so many others have forgotten, that the capital fact in regard to the life of the mind is consciousness. This is the point of view which at the present day has been exaggerated by the American "Christian Scientists" who even deny bodily disease on the ground that the health of the body depends upon that of the mind, and the mind being a portion of the divine mind, it cannot be diseased. Heinroth is too much of a physician and a biologist to arrive at that simplistic conception. In him we find a sort of spiritual stoicism. He believes that bodily disease can hardly

arise if we live by reason, and when it does develop as the result of exterior circumstances, it does not necessarily have any effect upon our state of mind.

Heinroth is religious; he founds himself directly upon the Holy Scriptures. He unhesitatingly admits the hypothesis of original sin, for he claims for the mind the *liberty* given by God to man, and that if man strays from the ways of God and falls into physical or mental disease, it is by his fault, and he must bear the consequences.

But on examining this religiousness closely we do not find it to be narrow, nor does it wander into superstition. He takes the true aim of life to be advance along the road of perfection,

and the sole light that we have to guide us, to be our *reason*. And if we live constantly according to it, we keep in mental and physical health; if we do not listen to its teaching, we go astray and fall into sickness.

I believe that I am unaffected with any tinge of pietism, yet, after making a few corrections, I am able to accept this writer's view. It has a very strong analogy with the philosophical opinions I have expressed, and which I have applied in my psychic treatment. But we differ upon some important points. Heinroth fully admits not only the existence of a personal God, but also biblical revelation. He believes in an innate conscience in regard to good and evil, a torch set before us by Providence which we only allow to become

extinguished by our *fault*. There is no help for man except in the practise of the Christian virtues. Such is the view of Heinroth.

Personally, I am agnostic in regard to these metaphysical beliefs which I consider hypothetical. I cannot conceive the idea of an innate conscience placed in a child's head at a time when its brain is not even developed. Conscience is, to me, a treasure acquired by our own experience and that of others. It comes into being in the course of our life and grows richer and richer if our soul—I shall explain this word farther on-incited by the attraction of good, follows the path of ethical improvement. Where Heinroth sees a personal God who points out the way for us, I can only see an Ideal conceived

by our mind on the basis of our sensible experience. Lastly, while the confirmed ideas of liberty leads to a certain hardness in Heinroth, mitigated however in his practise of the medical priesthood, the *determinism* which I see ruling in the life of man and in the whole of nature, leads me to a constant indulgence that shuts the eyes to the past of others and has but one object: to lead them back to a healthy life, both of mind and body.

Heinroth's views upon the origin of the psychopathies have the impress of genius. He notes the numerous accidental moral and physical causes which provoke mental disorder and he realizes that it is the product of two concurrent factors: the primitive disposition of mind which plays the part of a mother

in his simile, and evil, namely all that is contrary to reason, which he calls the father. Man is never indifferent: he always desires or fears. This impressionability varies in different individuals, according to their constitution, and in this Heinroth recognizes an undeniable influence of the physical upon the mental. But he does not consider that this view gives support to the materialistic conception-because it is the mind that determines the state of the body and we hold in our own hands the helm of reason. He here forgets that every one does not, to begin with, possess this sovereign reason, which would indeed be the remedy for all our troubles, nevertheless, no one attains to it. His dogma of liberty prevents him arriving at the determinist conception.

Like many other observers. Heinroth realizes well the commonplace character of the physical and mental factors which produce alienation. These he finds in part to be physiological conditions—puberty, menstruation, pregnancy, the puerperium, the menopause, senility, or constitutional and accidental diseases; and, on the other hand, the vicissitudes of existence common to all humanity. He asks the double question: Why is it that only a certain number of individuals succumb to the influence of these every-day causes? Why, on the contrary, are so many able to live in evil, continuing to be slaves to their passions, suffering all the physical and moral effects of an unruly life, yet do not thereby lose their reason? It is, he says, because, in order to produce

the fatal catastrophe, there must be a specially close affinity between the natural and temporary dispositions of the subjects and the event which plays the part of provoking agent.

This observation shows very fine insight into the various conditions which contribute to the production of the psychopathies. All these conclusions of Heinroth indicate that he possessed strong reason, cogent logic and high professional morality. One is surprized to see such a personality fall, as it were, into oblivion, still more to see him followed by generations of psychiatrists and neurologists to whom his ethical data are no better than Chinese. But truth pursues its way untroubled by the obstacles it meets with.

From time to time in the course of

the nineteenth century we find fresh attempts being made to give a preponderant value to the psychic factors and to institute a psychic treatment based upon that view.

In 1840, Leuret, in his fine work, "The Moral Treatment of Insanity," brings forward excellent arguments against the somatic theory. He notes the influence of the passions and, particularly, ambition as a cause of mental disorder, and he institutes a psychic treatment by persuasion, in which too frequent use is made of the douche as a means of intimidation. In this he is akin to Horn and Sandtmann and does not care in the least if he loses the affection of his patients by his severity, provided he cures them. Yet what devotion he shows in his psychotherapy when

At last the leaders of schools are also evolving, and in his eighth edition Kraepelin assigns to psychic factors an importance very different from what he did when he commenced writing. Even in relation to the circular insanities, which by their periodicity appear to support the organic theory, Kraepelin points to depression due to psychic causes. He attributes many of the phobias to the influence of certain features of modern life upon the mentality of the subject. That means that he recognizes the psychological origin of these disturbances of ideation. He still, in my opinion, commits the error of making too great a separation between the affective and the intellectual phenomena. Westphal came nearer to the truth.

To endeavour to enumerate all the writers who have more or less definitely entered upon the path of rational psychotherapy would be an endless task; already their name is legion and there are some in every country. In America this movement has become considerable and clergymen and other teachers are cooperating with physicians and neurologists of the greatest distinction in the work of moral reeducation. I am not yet decided as to the value of this collaboration.

To sum up, if from wrongly interpreted biological science many medical men have not risen beyond somatic views, there have always been physicians of insight who have recognized the importance of psychic phenomena. There have always been practitioners, who, without professing any theories on

the subject, have used their moral influence to lead their patients back to healthy habits of life and to fortifying religious or philosophical convictions. And now, after many gropings, these ideas are becoming defined and we are entering at last upon an era of truly rational psychotherapy. There still remain many battles to be fought, not only with the obdurate somatists, but even among the partizans of psychotherapy, for every one has his own ideas on the subject. Believers in "suggestion" will not lav down their arms, but will continue to attract to their ranks the medical men who do not know how to reflect and to attain to a higher conception. For some time yet, the "psychoanalysts" will take pride in the superiority they attribute to themselves, believing, as they do, that they penetrate

more deeply the innermost depths of the human mind, which draws its existence from the "subconscious," according to them. Let us leave all these susceptibilities among medical men and scientists to react upon each other. Something always come of these discussions and it is by passing through error that we gain the truth.

It remains for me to describe briefly the conception of the origin of the psychopathies at which I have arrived.

The biologist is unable to admit the truly simplistic idea of spiritualistic dualism, that is to say, the existence of an immaterial substance occupying the material body. Science endeavours to reduce phenomena to simple elements; it aims at unity and so is monist.

It regards man as one whole, composed of differentiated organs which react under the influence of various stimuli according to the constitution and excitability proper to the cells composing them. We regard life itself as an organic reaction to the various stimuli which start from our senses or from within our organism (internal sensations).

I am in no way opposed to this scheme of the vital manifestations and, as far as our knowledge goes, I think that we should apply the modern data of energy to all these problems. In this sense I regard myself as a "monist-materialist."

But if this is, so to speak, a postulate of the reason, I am sorry to see the cause of science compromised by those who

adopt insufficiently-grounded conclusions. The scientist may put forward hypotheses and guide his researches by such anticipatory views, but he must remain agnostic toward everything that has not been demonstrated. To suppress a problem is not to solve it, yet that is what is constantly being done.

If we look at the various stimuli which determine the reactions of our different organs, and which in fact make life, we shall find two classes:

- I. Physical stimuli, acting upon our five senses and determining reactions directly.
- 2. Psychic stimuli, in which, even when of sensorial origin, the reaction is only brought about by mental representations, i. e., follows upon thoughts and ideas.

Allowing that in final analysis these two orders of stimuli may be reducible to material elements, it is none the less true that there are notable differences between them.

The physical stimuli, both physiological and artificial, are in their essence more or less known; they are measurable and always identical in their action. These are the reactions that are studied in Physiology. Let us note that these reactions are all possible in natural or induced sleep; the experiments of vivisection are most usually performed in the state of nar-These stimuli are also intercosis. changeable and we can equally excite the motor and sensory nerves and those of the special senses by their natural stimulus or by mechanical irritants such

as a blow, heat or electricity. This last agent, which has been rendered very amenable by technical advances, may be substituted for any of the others. By varying the potential and the duration of the current we can stimulate all the nerves or induce the contraction of single muscles or of groups of muscles, and we can irritate the sensory nerves and produce pain or evoke visual, auditory, gustatory or olfactory sensations. Nothing better proves the materiality of these phenomena than the fact of their being thus able to be produced by this single physical agent.

I wish particularly to draw attention to the fact that the *voluntary nerve* current, as being the normal stimulus of the muscular function, may be replaced

by electricity, so that, like Duchénne of Boulogne, we may produce, by suitably applied electrodes, a mimicry of the passions or cause an unconscious subject to execute combined movements of the arms and legs. In contradistinction, we cannot, by the use of these devices, produce the motives or associations of ideas which determine our actions under normal conditions. We may imitate the will in its effects, but we cannot create a voluntary current following upon perceptions synthetized into a stimulant whole of a psychological order.

Note also that when it is the sensory nerves or the nerves of special senses that are in question we pass from the strictly *physiological* domain and at once enter that of *psychology*.

A new phenomena comes into play, that of conscious perception. We are now confronted by individual appreciations dependent upon the mentality of the subject.

But does not this mentality correspond with the cerebral constitution, with the physico-chemical conditions? Doubtless; there is nothing in the mentality which is not at the same time in the head. But we must frankly admit that we have not the slightest idea as to the nature of this phenomenon of the receptive consciousness of all our sensations. I can quite well conceive the transformation of a mechanical stimulus, such as a pin-prick, into a nervous wave travelling along the nerves with known velocity; I can also imagine the current arriving at cer-

tain groups of cells and there producing vibrations of the nature of which we are ignorant, but which will not escape future investigations. I find it impossible to understand, even to realize by thought, the transformation of that cellular activity into a phenomenon of consciousness, the perception of the sensation of the pinprick. This consciousness is the capital fact of psychic phenomena and not as declares an epiphenomenon. Ribot Psychology begins at this point of perceptive consciousness. Therefore the study of pure sensation no longer belongs to the domain of physiology in the restricted sense of the word. asmuch as it is perceived, sensation is already an internal view of mental images and that is a mystery which the

researches of the greatest physiologists have been unable to reveal.

It is as though there were an internal eye which took note, not of the movement in the cells, but of what that movement symbolically or ideally expresses. We discern only a mental image which we call a sensation or impression. Conducted by way of our five senses, these sensations combine, and give rise to more or less complex mental representations. By a process which we do not yet understand but which it is perhaps permissible to regard as a question of cellular euphory the mental representations produce sentiments of pleasure or pain, or rather, of well-being or ill-being, which determine our actions, equally when we are obeying a moral idea or seeking the

simple pleasure of a sensation. I do not hesitate to admit the materiality of all these phenomena, but here we enter upon a domain which, from its extent and the complexity of its phenomena, merits separate consideration.

We are now in the region of the phenomena of mind, in the world of ideas, and it appears to me puerile to try to follow the process by gazing through the microscope or calculating the calories absorbed by the work done. I do not mean to say that I reject the use of histology and biological chemistry; on the contrary, I am persuaded that cellular alterations will be discovered in all the psychopathies and that physico-chemical phenomena might be observed in the brain of any one who thinks, feels and acts. But we

should only be able to note anatomical changes and physiological movements; we should not see the passage of thought. The process has analogy with the magnified image of an electric battery projected upon a screen. We see bubbles of hydrogen produced on the surface of the carbon and particles of zinc being dissolved; we observe all this effervescence, but we do not see the passage of the unknown agent that we call electricity.

It is the observation of this unexplained internal vision that has maintained the idea of dualism in many minds. The complexity of the mental functions is so great that ignorance of the manifold stimuli which cause us to act has led us to overlook the necessary determinism and to admit the indeter-

minism of the mental operations. At the same time, contemplation of the order reigning in nature, and the repugnance that we feel to seeing our personality disappear, have led to theistic theories and belief in an after-life.

In these beliefs there is evidently nothing scientific, and if, personally, I remain sceptical in regard to them, I must say that we are all equally ignorant concerning the problem of life. Under these conditions all hypotheses are permissible, and no one has the right to ridicule the opinions of others when proof on either side is impossible. The great physiologist, du Bois-Reymond, devoted a notable lecture to these questions. He came to the conclusion that it was impossible for science to resolve the problem and he

7. Intoxication with alcohol or other substances speedily modifies the mental operations.

It would be easy to indicate many more circumstances which are capable of temporarily, or in a durable manner, affecting our state of mind.

It is in this unstable position produced by circumstances that the provoking agent most readily attacks us and induces the catastrophe. Often it plays the double part both of provoking agent and of modifier of the primitive mentality. And amid these various factors we always come again to the primitive mentality. Under the influence of the same events, one becomes neurasthenic, another hysterical, hypochondriacal, melancholic or paranoiac according to their psychic tendencies.

I have sometimes expressed this by saying: "As the tree grows so it falls."

The true cause of the psychopathies is therefore to be found in this native weakness of the mentality, in a psychasthenia which allows commonplace factors to precipitate the individual into an abnormal state. These latter are not specific in any sense; that is why they are so manifold; they consist in everything which lessens the reason or the power of judgment. It is not merely a simple predisposition; it is an already abnormal mental state demonstrable in the individual before he is actually ill. There are a great many regarding whom one might almost predict the catastrophe, once one knows their habitual mentality.

In all psychopaths, moreover, when we become intimately acquainted with them, we observe a manner of reasoning and feeling that even in their lucid moments and quite apart from the subject of their insanity, departs from the normal conventional. I can affirm that in the whole of my medical career. continually in contact with such psychopaths, I have not found a single one exempt from these primitive mental defects consisting in oddnesses of character and notably in a weakness of judgment in various domains. serve that I regard the slightest neurasthenia as a psychopathy. It is also true that there are many individuals who think badly but do not become psychopaths; that is because, in their case, there has not been the association

of causal circumstances and temporary fragility.

The ultimate discovery of histological changes in the brain corresponding to the different forms of psychopathy, will in no way weaken these conclusions. Such lesions must exist, but they are secondary in the sense that they have been produced by the influence of mental representations. They are the residuum of functional activity.

Therapeutically, this conception which I term psychological demands a different procedure to what has hitherto been followed. Doubtless, we shall always seek to eliminate provoking agents, both physical and mental, by placing the patient under favorable conditions; by appropriate medication we shall counteract organic disorders

which favour the development of psychopathic disturbances. But we are now urgently called upon to consider before everything, the *primitive mentality* of the subject and to correct it by a true *intellectual and moral education*.

The psychological function of the brain has indeed also its material basis; it consists in *cerebral work* and therefore the mind (âme), for we must preserve the word, is subject to the yoke of the other organs. But it is not the serious organic disorders observed by the clinician that alter the mentality the most profoundly. The mind may remain immune in bodily disease and, on the other hand, we find lunatics whose physical health is excellent. The psychic function is more delicate and intimate. It is not accessible to

histological or chemical investigation, however searching these methods may become.

If the mentality with which we are endowed at a particular age were entirely native and hereditary, it would be very difficult to modify; often we should be able to do nothing but bow before the fatal law. But our mentality is a complex product made up of an innate foundation to which is added the superstructure of our sensible experi-This mentality continues to evolve under the various educative influences acting daily upon us. thus, by self-culture, our personality in a certain measure, we modify. It is evident that education designed and carried out by the psychotherapist, may equally alter the primitive tempera-

ment of the particular patient. The pathological mentalities have been formed, and they can be reformed. Doubtless it is a difficult process, but it is the true and only treatment for the psychopathies. As the psychiatrist del Greco has very truly said, physical treatment only acts en bloc upon certain factors which contribute to the production of the psychosis; psychotherapy, by persuasion, alone goes to the root of the matter.

However difficult may be this method of treatment, which alone fulfils the *indicatori morbi*, I have seen too many remarkable and enduring results to doubt its efficacy. Medicine of the twentieth century cannot remain content with the views of a too simplistic materialism which thinks to resolve

questions by suppressing them. Without abandoning its physiological researches, it will more and more recognize the importance of psychological phenomena.



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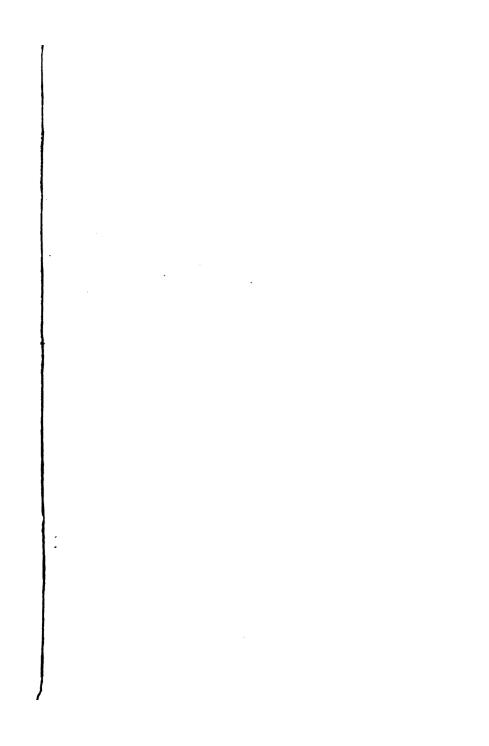
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